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CONFIRMATION NO. 9043

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>09/923,285 | <b>FILING OR 371(c) DATE</b><br>08/06/2001<br><b>RULE</b> | <b>CLASS</b><br>707 | <b>GROUP ART UNIT</b><br>2168 | <b>ATTORNEY DOCKET NO.</b><br>13906.105003 |
|------------------------------------|---|---------------------|-------------------------------|--|

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**\*\* CONTINUING DATA \*\*\*\*\***  
 This appln claims benefit of 60/223,232 08/04/2000  
 and claims benefit of 60/226,117 08/18/2000  
 and claims benefit of 60/238,847 10/06/2000  
 and claims benefit of 60/245,867 11/07/2000  
 and claims benefit of 60/253,298 11/27/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
 NONE

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
 \*\* 09/13/2001

|  |   |                               |                            |                           |                                 |
|--|---|-------------------------------|----------------------------|---------------------------|---------------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met<br>Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Examiner's Signature: [Signature] Initials: [Initials] | <b>STATE OR COUNTRY</b><br>GA | <b>SHEETS DRAWING</b><br>7 | <b>TOTAL CLAIMS</b><br>95 | <b>INDEPENDENT CLAIMS</b><br>11 |
|--|---|-------------------------------|----------------------------|---------------------------|---------------------------------|

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**TITLE**

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| <b>FILING FEE RECEIVED</b><br>1446 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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